

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007634

FILED  
Feb 05, 2010  
Secretary of State

**Entity Name:** THE INTERNATIONAL ASSOCIATION FOR THE STUDY OF ATTACHMENT, INC.

**Current Principal Place of Business:**

9481 SW 147TH STREET  
MIAMI, FL 33176

**New Principal Place of Business:**

**Current Mailing Address:**

9481 SW 147TH STREET  
MIAMI, FL 33176

**New Mailing Address:**

**FEI Number:** 26-0680687

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CRITTENDEN, PATRICIA M  
9481 SW 147TH STREET  
MIAMI, FL 33176 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** CRITTENDEN, PATRICIA M PHD  
**Address:** 9481 SW 147TH STREET  
**City-St-Zip:** MIAMI, FL 33176

**Title:** D  
**Name:** BLOWS, MICHAEL MD  
**Address:** 10 KENT ROAD  
**City-St-Zip:** BURY ST. EDMUNDS, SUFFOLK, SU IP286HP UK

**Title:** D  
**Name:** HAUTAMAKI, AIRI  
**Address:** LOHITIE 10 A  
**City-St-Zip:** ESPOO, FINLAND, FI 2170 FI

**Title:** DS  
**Name:** LANDINI, ANDREA MD  
**Address:** VIA TERRACHINI 14 42100  
**City-St-Zip:** REGGIO EMILIA, IT 42100 IT

**Title:** DT  
**Name:** NICKEL, IRMGARD  
**Address:** 601 AULNEAU STREET  
**City-St-Zip:** WINNIPEG, MB R2H2V5 CA

**Title:** D  
**Name:** NILSEN, BENTE  
**Address:** DRONNINGVEIEN 52  
**City-St-Zip:** KROKKLEIVA, NORWAY, NO 3531 NO

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** IRMGARD NICKEL

DT

02/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date